



Development Services Dept.
1775 12th Ave NW
PO Box 1307
Issaquah, WA 98027-1307
Phone: (425) 837-3100

VALID THROUGH:

COLLECTIVE OPENING DAY:

LIC. # **CG** -

COLLECTIVE GARDEN SAFETY LICENSE APPLICATION

NOTE: *Inspection approvals are necessary before applicant may occupy or use a building for collective garden purposes. Additional permits or licenses may be necessary before the collective garden can commence operation. Contact the Permit Center at 425-837-3100 for specific requirements and additional City permits or licenses for your collective garden.*

(PLEASE PRINT - ALL QUESTIONS MUST BE ANSWERED)

COLLECTIVE GARDEN NAME: DBA: PHYSICAL ADDRESS: MAILING ADDRESS: COLLECTIVE PHONE: () COLLECTIVE E-MAIL: UBI #: Administrative Site Development Permit (ASDP) File #:	APPLICANT NAME: DATE OF BIRTH: DRIVER'S LICENSE: MAILING ADDRESS: CONTACT NAME: CONTACT PHONE : () CONTACT E-MAIL: Attach Medical Marijuana Qualifying Patient Valid Documentation
Description of Collective Garden (Give Specific Details):	
Has the applicant ever been convicted of a crime related to the drug laws? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, provide details</i> Fingerprint Background Check: Submit fingerprints and \$70.25 non-refundable fee to the Issaquah Police Department, 130 E. Sunset Way ONLY on Tuesdays and Thursdays from 9:00 AM to 10:00 AM. Please allow ample time to complete your paperwork and prints. IPD will notify the Permit Center/Planning Department of the results. Fingerprint Fee Breakdown: Washington State Patrol = \$36.00; FBI = \$19.25; Issaquah Police Department = \$15.00 (IPD standard fingerprint fee)	
NON-REFUNDABLE FEES MUST ACCOMPANY THIS APPLICATION <input type="checkbox"/> COLLECTIVE GARDEN SAFETY LICENSE \$350 <input type="checkbox"/> RENEWAL LICENSE \$140 (Application & applicable information required) ATTENTION: A Collective Garden Safety License is valid for one (1) year from the date of issuance. Renewal of a Collective Garden Safety License is the responsibility of the licensed individual.	
SIGNATURE of Applicant: _____ PRINT Name of Applicant: _____ TITLE of Applicant (owner, partner, officer, authorized agent): _____ Application Date: _____	
Pursuant to IMC 5.18.090, the granting of a collective garden safety license shall not be construed as the City's authorization of any person to engage in any activity prohibited by federal, State or local law or regulation.	

FOR OFFICE USE ONLY

PRIOR TO ISSUANCE OF THIS LICENSE, A COLLECTIVE GARDEN SHALL:

1. HAVE CITY APPROVAL OF A BACKGROUND FINGERPRINT CHECK
2. HAVE INSTALLED AN OPERATIONAL SECURITY ALARM SYSTEM THAT IS MONITORED 24 HOURS A DAY
3. HAVE INSTALLED AN OPERATIONAL SECURITY CAMERA SYSTEM WHICH RETAINS RECORDINGS FROM ALL INSTALLED CAMERAS FOR A PERIOD OF NOT LESS THAN SIXTY (60) DAYS
4. HAVE APPROVAL OF ANY REQUIRED ADDITIONAL PERMITS, SUCH AS BUT NOT LIMITED TO, AN ADMINISTRATIVE SITE DEVELOPMENT PERMIT (ASDP), BUILDING PERMIT AND OTHER CONSTRUCTION PERMITS
5. SHOW COMPLIANCE WITH CONDITIONS OF APPROVAL OF ALL PERMITS AND LICENSES.

DSD (Planner): _____ DATE: _____

Police: _____ DATE: _____

ADDITIONAL CONDITIONS:
